

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal			FEC IDENTIFICATION NUMBER ▼ C C00523621		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					

Full Name (Last, First, Middle Initial) of Payee Good Jobs Better Baltimore			Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012		
Mailing Address 611 North Eutaw Street			Amount 20480.00		
City Baltimore	State MD	Zip Code 21201	Transaction ID : D294695		
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____		
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 4362960.93			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		

Full Name (Last, First, Middle Initial) of Payee Good Jobs Better Baltimore			Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012		
Mailing Address 611 North Eutaw Street			Amount 19840.00		
City Baltimore	State MD	Zip Code 21201	Transaction ID : D294697		
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____		
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 4362960.93			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		

(a) SUBTOTAL of Itemized Independent Expenditures.....	40320.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Signature _____ Date M M / D D / Y Y Y Y Y Y
10 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 2 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

FEC IDENTIFICATION NUMBER ▼

C C00523621

Check If ☐ 24-hour report ☒ 48-hour report

New report

☐ Amends report filed on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

Good Jobs Better Baltimore

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Mailing Address 611 North Eutaw Street

City
BaltimoreState
MDZip Code
21201

Amount

20480.00

Transaction ID : D294698

Purpose of Expenditure

Est. payment for salary and other canvass-related expenses from 10/1-11/6

Category/
Type

001

Office Sought:

☐ House

State: VA

☒ Senate

District:

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

TIMOTHY MICHAEL KAINE

Calendar Year-To-Date Per Election
for Office Sought

239136.22

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Good Jobs Better Baltimore

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Mailing Address 611 North Eutaw Street

City
BaltimoreState
MDZip Code
21201

Amount

1280.00

Transaction ID : D294699

Purpose of Expenditure

Est. payment for rally expenses

Category/
Type

007

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

4362960.93

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

21760.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

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Eliseo Medina

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 3 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

FEC IDENTIFICATION NUMBER ▼

C C00523621

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

Good Jobs Better Baltimore

Date

M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2012

Mailing Address 611 North Eutaw Street

Amount

1920.00

Transaction ID : D294700

Purpose of Expenditure
Est. payment for rally expensesCategory/
Type 007Office Sought: ☐ House ☐ Senate ☒ President
State: _____ District: _____Check One: ☐ Support ☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

MITT ROMNEY

Calendar Year-To-Date Per Election
for Office Sought

4362960.93

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

SEIU IL State Council

Date

M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2012

Mailing Address 111 E Wacker

Amount

86408.00

Transaction ID : D294701

Purpose of Expenditure
Est. payment for salary and other canvass-related expenses
from 10/1-11/6Category/
Type 001Office Sought: ☐ House ☐ Senate ☒ President
State: _____ District: _____Check One: ☐ Support ☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

MITT ROMNEY

Calendar Year-To-Date Per Election
for Office Sought

4362960.93

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

88328.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

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Eliseo Medina

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 / 03 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 4 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

FEC IDENTIFICATION NUMBER ▼

C C00523621

Check If ☐ 24-hour report ☒ 48-hour report☒ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

SEIU IL State Council

Date

M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2012

Mailing Address 111 E Wacker

Amount

45604.00

City

Chicago

State

IL

Zip Code

60601

Transaction ID : D294702

Purpose of Expenditure

Est. payment for salary and other canvass-related expenses from 10/1-11/6

Category/
Type

001

Office Sought:

☐ House

State: WI

☒ Senate

District:

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Tammy Baldwin

Calendar Year-To-Date Per Election
for Office Sought

559638.66

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

SEIU IL State Council

Date

M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2012

Mailing Address 111 E Wacker

Amount

48004.00

City

Chicago

State

IL

Zip Code

60601

Transaction ID : D294703

Purpose of Expenditure

Est. payment for rally expenses

Category/
Type

007

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

4362960.93

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

93608.00

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

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Eliseo Medina

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 / 03 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee SEIU Local 1199 WOK			Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 1395 Dublin Road			Amount 28501.00	
City Columbus	State OH	Zip Code 43215	Transaction ID : D294704	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4362960.93			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee SEIU Local 1199 WOK			Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 1395 Dublin Road			Amount 28501.00	
City Columbus	State OH	Zip Code 43215	Transaction ID : D294705	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4362960.93			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	57002.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Eliseo Medina

Signature

[Electronically Filed]

Date

MM / DD / YYYY
10 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 6 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

FEC IDENTIFICATION NUMBER ▼

C

C00523621

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

SEIU Local 1199 WOK

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 1395 Dublin Road

Amount

City

Columbus

State

OH

Zip Code

43215

57001.00

Transaction ID : D294706

Purpose of Expenditure

Est. payment for salary and other canvass-related expenses from 10/1-11/6

Category/
Type

001

Office Sought:

☒

House

State: OH

☐

Senate

District: 16

☐

President

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Betty Sutton

Calendar Year-To-Date Per Election
for Office Sought

74814.00

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Our DC

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 1800 Massachusetts Ave NW

Amount

City

Washington

State

DC

Zip Code

20036

34538.00

Transaction ID : D294707

Purpose of Expenditure

Est. payment for salary and other canvass-related expenses from 10/1-11/6

Category/
Type

001

Office Sought:

☐

House

State: _____

☐

Senate

District: _____

☒

President

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

4362960.93

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

91539.00

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

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Eliseo Medina

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 7 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Our DC		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 34538.00	
City Washington	State DC	Zip Code 20036	Transaction ID : D294708
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TIMOTHY MICHAEL KAINE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 239136.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Michigan		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 2604 4th Street		Amount 45337.00	
City Detroit	State MI	Zip Code 48201	Transaction ID : D294709
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4362960.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	79875.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Eliseo Medina

Signature

[Electronically Filed]

Date

MM / DD / YYYY
10 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 8 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

FEC IDENTIFICATION NUMBER ▼

C

C00523621

Check If ☐ 24-hour report ☒ 48-hour report

New report

☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

SEIU Healthcare Michigan

Date

M M M /

D D D /

Y Y Y Y Y Y Y

Mailing Address 2604 4th Street

Amount

City

Detroit

State

MI

Zip Code

48201

23862.00

Transaction ID : D294710

Purpose of Expenditure

Est. payment for salary and other canvass-related expenses from 10/1-11/6

Category/
Type

001

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

MITT ROMNEY

Calendar Year-To-Date Per Election
for Office Sought

4362960.93

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

SEIU Healthcare Michigan

Date

M M M /

D D D /

Y Y Y Y Y Y Y

Mailing Address 2604 4th Street

Amount

City

Detroit

State

MI

Zip Code

48201

16703.00

Transaction ID : D294711

Purpose of Expenditure

Est. payment for salary and other canvass-related expenses from 10/1-11/6

Category/
Type

001

Office Sought:

☐ House

State: MI

☒ Senate

District:

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Debbie Stabenow

Calendar Year-To-Date Per Election
for Office Sought

21475.00

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

40565.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

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Eliseo Medina

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 9 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

FEC IDENTIFICATION NUMBER ▼

C

C00523621

Check If ☐ 24-hour report ☒ 48-hour report

New report

☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

SEIU Healthcare Michigan

Date

M M M /

D D D /

Y Y Y Y Y Y Y

Mailing Address 2604 4th Street

City

Detroit

State

MI

Zip Code

48201

Amount

9545.00

Transaction ID : D294712

Purpose of Expenditure
Est. payment for rally expensesCategory/
Type

007

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

4362960.93

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

SEIU Healthcare Michigan

Date

M M M /

D D D /

Y Y Y Y Y Y Y

Mailing Address 2604 4th Street

City

Detroit

State

MI

Zip Code

48201

Amount

9545.00

Transaction ID : D294713

Purpose of Expenditure
Est. payment for rally expensesCategory/
Type

007

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

MITT ROMNEY

Calendar Year-To-Date Per Election
for Office Sought

4362960.93

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

19090.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

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Eliseo Medina

Signature

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 10 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

FEC IDENTIFICATION NUMBER ▼

C C00523621

Check If ☐ 24-hour report ☒ 48-hour report☒ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

SEIU Healthcare Michigan

Date

M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2012

Mailing Address 2604 4th Street

Amount

4772.00

Transaction ID : D294714

Purpose of Expenditure
Est. payment for rally expensesCategory/
Type 007

Office Sought:

☐ House

State: MI

☒ Senate

District:

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Debbie Stabenow

Calendar Year-To-Date Per Election
for Office Sought

21475.00

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

1 Miami

Date

M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2012

Mailing Address 333 41st Street, Suite 901

Amount

62059.00

Transaction ID : D294715

Purpose of Expenditure
Est. payment for salary and other canvass-related expenses
from 10/1-11/6Category/
Type 001

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

4362960.93

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

66831.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 / 03 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 11 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

FEC IDENTIFICATION NUMBER ▼

C C00523621

Check If ☐ 24-hour report ☒ 48-hour report☒ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

1 Miami

Date

M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2012

Mailing Address 333 41st Street, Suite 901

City

Miami Beach

State

FL

Zip Code

33140

Amount

62059.00

Transaction ID : D294716

Purpose of Expenditure

Est. payment for salary and other canvass-related expenses from 10/1-11/6

Category/
Type 001

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

MITT ROMNEY

Calendar Year-To-Date Per Election
for Office Sought

4362960.93

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

1 Miami

Date

M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2012

Mailing Address 333 41st Street, Suite 901

City

Miami Beach

State

FL

Zip Code

33140

Amount

15514.50

Transaction ID : D294717

Purpose of Expenditure

Est. payment for salary and other canvass-related expenses from 10/1-11/6

Category/
Type 001

Office Sought:

☐ House

State: FL

☒ Senate

District:

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BILL NELSON

Calendar Year-To-Date Per Election
for Office Sought

37697.50

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

77573.50

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 / 03 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 12 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

FEC IDENTIFICATION NUMBER ▼

C C00523621

Check If ☐ 24-hour report ☒ 48-hour report☒ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

1 Miami

Date

M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2012

Mailing Address 333 41st Street, Suite 901

Amount

15514.50

Transaction ID : D294718

Purpose of Expenditure

Est. payment for salary and other canvass-related expenses from 10/1-11/6

Category/
Type

001

Office Sought:

☒

House

State:

FL

☐

Senate

District:

26

☐

President

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

JOSE ANTONIO GARCIA

Calendar Year-To-Date Per Election
for Office Sought

15514.50

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

1 Miami

Date

M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2012

Mailing Address 333 41st Street, Suite 901

Amount

10343.00

Transaction ID : D294719

Purpose of Expenditure

Est. payment for rally expenses

Category/
Type

007

Office Sought:

☐

House

State:

☐

Senate

District:

☒

President

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

4362960.93

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

25857.50

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 / 03 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 13 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 4513 Vernon Blvd Suite 300		Amount 100561.00	
City Madison	State WI	Zip Code 53705	Transaction ID : D294721
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4362960.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 4513 Vernon Blvd Suite 300		Amount 98167.00	
City Madison	State WI	Zip Code 53705	Transaction ID : D294722
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 559638.66		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	198728.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature

[Electronically Filed]

Date

MM / DD / YYYY
10 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 14 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 4513 Vernon Blvd Suite 300		Amount 2394.00	
City Madison	State WI	Zip Code 53705	Transaction ID : D294723
Purpose of Expenditure Est. payment for direct mail		Category/ Type 006	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 559638.66		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 4513 Vernon Blvd Suite 300		Amount 2394.00	
City Madison	State WI	Zip Code 53705	Transaction ID : D294724
Purpose of Expenditure Est. payment for direct mail		Category/ Type 006	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4362960.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	4788.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature

[Electronically Filed]

Date

MM / DD / YYYY
10 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 15 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			
Full Name (Last, First, Middle Initial) of Payee United for New York, Inc.		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 330 W 42nd Street, Suite 900		Amount 21292.00	
City New York	State NY	Zip Code 10036	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 4362960.93		Transaction ID : D294731	
Full Name (Last, First, Middle Initial) of Payee United for New York, Inc.		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 330 W 42nd Street, Suite 900		Amount 10646.00	
City New York	State NY	Zip Code 10036	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: TIMOTHY MICHAEL KAINE		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 239136.22		Transaction ID : D294733	
(a) SUBTOTAL of Itemized Independent Expenditures.....		31938.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures.....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Eliseo Medina</i>		Date MM / DD / YYYY 10 / 03 / 2012	
[Electronically Filed]			

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 16 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee United for New York, Inc.		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 330 W 42nd Street, Suite 900		Amount 66537.00	
City New York	State NY	Zip Code 10036	Transaction ID : D294735
Purpose of Expenditure Est. payment for rally expenses		Category/ Type 007	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4362960.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee United for New York, Inc.		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 330 W 42nd Street, Suite 900		Amount 26615.00	
City New York	State NY	Zip Code 10036	Transaction ID : D294736
Purpose of Expenditure Est. payment for direct mail		Category/ Type 006	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4362960.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	93152.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature

[Electronically Filed]

Date

MM / DD / YYYY
10 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 17 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

FEC IDENTIFICATION NUMBER ▼

C

C00523621

Check If ☐ 24-hour report ☒ 48-hour report

New report

☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

United for New York, Inc.

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 330 W 42nd Street, Suite 900

Amount

City

New York

State

NY

Zip Code

10036

26615.00

Transaction ID : D294737

Purpose of Expenditure

Est. payment for direct mail

Category/
Type

006

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

MITT ROMNEY

Calendar Year-To-Date Per Election
for Office Sought

4362960.93

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

United for New York, Inc.

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 330 W 42nd Street, Suite 900

Amount

City

New York

State

NY

Zip Code

10036

26615.00

Transaction ID : D294741

Purpose of Expenditure

Est. payment for t-shirts and buttons

Category/
Type

006

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

4362960.93

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

53230.00

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 18 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00523621</div>	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	

Full Name (Last, First, Middle Initial) of Payee United for New York, Inc.		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Mailing Address 330 W 42nd Street, Suite 900		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">26615.00</div>	
City New York	State NY	Zip Code 10036	Transaction ID : D294742
Purpose of Expenditure Est. payment for t-shirts and buttons		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">4362960.93</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee One Pennsylvania		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Mailing Address 1500 North Second Street, Suite 11		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">66731.00</div>	
City Harrisburg	State PA	Zip Code 17102	Transaction ID : D294752
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">4362960.93</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">93346.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

10 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 19 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee One Pennsylvania		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 1500 North Second Street, Suite 11		Amount 31944.00	
City Harrisburg	State PA	Zip Code 17102	Transaction ID : D294753
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4362960.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee One Pennsylvania		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 1500 North Second Street, Suite 11		Amount 1815.00	
City Harrisburg	State PA	Zip Code 17102	Transaction ID : D294755
Purpose of Expenditure Est. payment for rally expenses		Category/ Type 007	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4362960.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33759.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature

[Electronically Filed]

Date

MM / DD / YYYY
10 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 20 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee One Pennsylvania		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 1500 North Second Street, Suite 11		Amount 71390.00	
City Harrisburg	State PA	Zip Code 17102	Transaction ID : D294756
Purpose of Expenditure Est. payment for rally expenses		Category/ Type 007	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4362960.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee One Pennsylvania		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 1500 North Second Street, Suite 11		Amount 1452.00	
City Harrisburg	State PA	Zip Code 17102	Transaction ID : D294757
Purpose of Expenditure Est. payment for t-shirts and buttons		Category/ Type 006	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4362960.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	72842.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature

[Electronically Filed]

Date

MM / DD / YYYY
10 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 21 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 42989.59	
City Washington	State DC	Zip Code 20036	Transaction ID : D294758
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 13 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RODNEY DAVIS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 53736.99		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 56281.45	
City Washington	State DC	Zip Code 20036	Transaction ID : D294760
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 17 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: ROBERT T. SCHILLING		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 284066.13		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	99271.04
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature

[Electronically Filed]

Date

MM / DD / YYYY
10 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 22 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y Y Y</div>	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y Y Y</div> 10 / 01 / 2012	
Mailing Address 1800 Massachusetts Ave NW			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">48000.00</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D294761	
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: <u>MN</u> <input type="checkbox"/> Senate District: <u>08</u> <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: RAYMOND J. CRAVAACK			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">60000.00</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y Y Y</div> 10 / 01 / 2012	
Mailing Address 1800 Massachusetts Ave NW			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">4413.02</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D294763	
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: <u>PA</u> <input type="checkbox"/> Senate District: <u>08</u> <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL G. FITZPATRICK			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">55641.20</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">52413.02</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature

[Electronically Filed]

Date

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10 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 23 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 4413.02	
City Washington	State DC	Zip Code 20036	Transaction ID : D294764
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 12
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 224713.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 42850.20	
City Washington	State DC	Zip Code 20036	Transaction ID : D294765
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL J. BENISHEK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 51063.16		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	47263.22
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature

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Date

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10 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 5399.65	
City Washington	State DC	Zip Code 20036	Transaction ID : D294766
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL COFFMAN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 315849.07		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 5245.47	
City Washington	State DC	Zip Code 20036	Transaction ID : D294768
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4362960.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	10645.12
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Eliseo Medina

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 6118.26	
City Washington	State DC	Zip Code 20036	Transaction ID : D294769
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 45886.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 60933.33	
City Washington	State DC	Zip Code 20036	Transaction ID : D294771
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: BILL JOHNSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 76933.33		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	67051.59
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature

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Date

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10 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal			FEC IDENTIFICATION NUMBER ▼ C C00523621		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin			Date M M / D D / Y Y Y Y Y Y Y Y 10 / 01 / 2012		
Mailing Address 4513 Vernon Blvd Suite 300			Amount 34707.07		
City Madison		State WI		Zip Code 53705	
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type 001		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08	
Name of Federal Candidate Supported or Opposed by Expenditure: REID RIBBLE				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 43383.84			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin			Date M M / D D / Y Y Y Y Y Y Y Y 10 / 01 / 2012		
Mailing Address 4513 Vernon Blvd Suite 300			Amount 34707.07		
City Madison		State WI		Zip Code 53705	
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type 001		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 07	
Name of Federal Candidate Supported or Opposed by Expenditure: SEAN DUFFY				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 43383.84			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			69414.14		
(b) SUBTOTAL of Unitemized Independent Expenditures▶					
(c) TOTAL Independent Expenditures.....▶					
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">Eliseo Medina</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date M M / D D / Y Y Y Y Y Y Y Y 10 / 03 / 2012</p>					

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Working Families Organization, Inc.		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 2 Nevins Street		Amount 18034.84	
City Brooklyn	State NY	Zip Code 11217-1010	Transaction ID : D294779
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL G. FITZPATRICK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 55641.20		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Working Families Organization, Inc.		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 2 Nevins Street		Amount 18034.84	
City Brooklyn	State NY	Zip Code 11217-1010	Transaction ID : D294781
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 12
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 224713.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	36069.68
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature

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Date

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 28 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y			

Full Name (Last, First, Middle Initial) of Payee Working Families Organization, Inc.			Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
Mailing Address 2 Nevins Street			Amount 18034.84	
City Brooklyn	State NY	Zip Code 11217-1010	Transaction ID : D294783	
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 18	
Name of Federal Candidate Supported or Opposed by Expenditure: NAN HAYWORTH			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 30096.80			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Citizen Action of NY			Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
Mailing Address 94 Central Avenue			Amount 6042.60	
City Albany	State NY	Zip Code 12206-3002	Transaction ID : D294786	
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 18	
Name of Federal Candidate Supported or Opposed by Expenditure: NAN HAYWORTH			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 30096.80			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	24077.44
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Signature _____ Date M M / D D / Y Y Y Y Y Y
10 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Fair Share Alliance, Inc.			Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 218 D Street, SE			Amount 37892.26	
City Washington	State DC	Zip Code 20003-1900	Transaction ID : D294787	
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL COFFMAN			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 315849.07			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Florida Consumer Action Network, Inc.			Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 3006 W Kennedy Blvd. Ste B			Amount 33212.47	
City Tampa	State FL	Zip Code 33609-3289	Transaction ID : D294789	
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 13 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: C W BILL YOUNG			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 39753.22			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	71104.73
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature

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10 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 30 OF 33
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>			
Full Name (Last, First, Middle Initial) of Payee Florida Consumer Action Network, Inc.		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M / D D / Y Y Y Y Y Y </div> 10 / 01 / 2012	
Mailing Address 3006 W Kennedy Blvd. Ste B		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1671.53</div>	
City Tampa	State FL	Zip Code 33609-3289	Transaction ID : D294790
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">4362960.93</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Full Name (Last, First, Middle Initial) of Payee Alliance for Californians for Community Empowerment		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M / D D / Y Y Y Y Y Y </div> 10 / 01 / 2012	
Mailing Address 3655 S. Grand Ave.		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">30591.32</div>	
City Los Angeles	State CA	Zip Code 90007-4316	Transaction ID : D294793
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">45886.98</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">32262.85</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures▶		<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>	
(c) TOTAL Independent Expenditures.....▶		<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature Eliseo Medina		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M / D D / Y Y Y Y Y Y </div> 10 / 03 / 2012	
[Electronically Filed]			

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee Florida New Majority		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M M / D D D / Y Y Y Y Y Y </div> 10 / 01 / 2012	
Mailing Address 6127 NW 7th Avenue		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 39776.09 </div>	
City Miami	State FL	Zip Code 33127-1111	Transaction ID : D294796
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: ALLEN B WEST		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 47234.10 </div>		<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 47234.10 </div>	

Full Name (Last, First, Middle Initial) of Payee Action United		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M M / D D D / Y Y Y Y Y Y </div> 10 / 01 / 2012	
Mailing Address 846 N Broad St.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 22065.10 </div>	
City Philadelphia	State PA	Zip Code 19130-2234	Transaction ID : D294797
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL G. FITZPATRICK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 55641.20 </div>		<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 55641.20 </div>	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 61841.19 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 61841.19 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

 10 / 03 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Action United		Date M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2012	
Mailing Address 846 N Broad St.		Amount 22065.10	
City Philadelphia	State PA	Zip Code 19130-2234	Transaction ID : D294799
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 12
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 224713.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee SEIU Missouri Kansas State Council		Date M M M / D D D / Y Y Y Y Y Y 10 / 02 / 2012	
Mailing Address 5585 Pershing Ave. Ste 120		Amount 52225.00	
City Saint Louis	State MO	Zip Code 63112	Transaction ID : D294693
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/2-11/6		Category/Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District:
Name of Federal Candidate Supported or Opposed by Expenditure: Claire McCaskill		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 52225.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	74290.10
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 / 03 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee SEIU Missouri Kansas State Council		Date MM / DD / YYYY 10 / 02 / 2012	
Mailing Address 5585 Pershing Ave. Ste 120		Amount 52225.00	
City Saint Louis	State MO	Zip Code 63112	Transaction ID : D294694
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/2-11/6		Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4362960.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Terra Strategies, LLC		Date MM / DD / YYYY 10 / 02 / 2012	
Mailing Address 100 East Grand Ave. Suite 380		Amount 106857.16	
City Des Moines	State IA	Zip Code 50309	Transaction ID : D294813
Purpose of Expenditure Payment for Canvassing Services		Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 17
Name of Federal Candidate Supported or Opposed by Expenditure: CHERI BUSTOS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 284066.13		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	159082.16
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	2088918.28

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature

[Electronically Filed]

Date

MM / DD / YYYY
10 / 03 / 2012